

Public Testimony and Comments Regarding the 2019 Proposed Wellmark, Inc. Rate Increase

For Consideration by Commissioner Doug Ommen, Iowa Insurance Division

Prepared by the Office of Consumer Advocacy, Iowa Insurance Division

August 18, 2018

I. Background

Iowa Code §505.19 sets forth procedures for health insurance rate increase requests exceeding the average annual health spending growth rate published by the Centers of Medicare and Medicaid Services (CMS). The procedures include a requirement that the Office of Consumer Advocacy solicit public comments on the proposed rate increase, provide the comments received by the public on the internet, and to present the public testimony and comments received to the Commissioner of Insurance for consideration before a decision is made on the proposed rate increase.

The Office of Consumer Advocacy was notified on June 15, 2018 that the collective companies for Wellmark, Inc. are seeking proposed average rate increase of 8.1% for individual pre-ACA blocks of business. The proposal varies by plan, with a low of 5.3 % and a high of 11%. The 5.3% increase applies to all Farm Bureau and Basic and Standard plans. The 11% increase applies to Pools 3, 4 and 5. All of the plans affected are either grandfathered plans or transitional business plans for a total of 63,104 covered lives. The proposed rate increase would become effective January 1, 2019 if approved. As the amount proposed exceeded the most current average annual health spending growth rate, the Office of Consumer Advocacy solicited comments regarding the proposed increase.

II. Actuarial Review

As a regular part of the rate review process, the proposed rate increase is actuarially reviewed twice. Once by the Iowa Insurance Division's actuary staff and once again by independent third party reviewers. An actuary summary document is available as a handout during the public hearing and has been posted on the rate hearing website, <https://iid.iowa.gov/2019-health-reate-increases> .

The actuaries found the following:

- The current loss ratio for Wellmark is 86%, which is above the federal requirement of 80%.
- Without the rate increase in 2019, Wellmark is projected to have a loss ratio exceeding that of 91%.
- If an 8.1% increase is granted, it is projected that Wellmark will still meet the federal requirement of at least an 80% medical loss ratio.
- The projected average premium will be \$438.00, based upon an average increase of \$33 per month.

III. Public Comments

The Office of Consumer Advocacy has received 80 comments and concerns directly from policyholders or members of the public. All commenters disagreed with the proposed rate increase and shared that the premium is currently unaffordable as will be the increased premium if the proposed rate increase is

approved. Many have received rate increases over the past several years and are weary of the annual rate increases.

One grandfathered or transitional plan policyholder commented:

“I’m tired of - every year- at least 10 years, the rate’s gone up EVERY year, SIGNIFICANTLY. I don’t mind if everyone with Wellmark insurance was affected, but why should my individual coverage be singled out? So this year my rate will increase by 11%. I’m already paying \$12,000 annually, another 11% makes a yearly premium of \$13,320. Totally unaffordable, but what other choice do I have?”

Another commented:

“My individual insurance rates have been going up approximately 10% per year since I enrolled eight years ago. I realize I am grouped with a myriad of other individuals, but I have not "used" my insurance benefits to any great extent over those eight years. I’ve already had to change my benefits package (deductibles) to try to mitigate that sharp rise in premiums. I am currently paying well over \$6,000 per year to Wellmark BCBS and have approximately \$300 per year in claims. I realize insurers must make money, but there must be a more equitable way to administer premiums reflective of the "individual" in an individual plan.”

IV. Conclusions

The actuarial summary shows that Wellmark’s request would likely place rates at a federally approved threshold close to 85%. Without the rate increase Wellmark is facing a possible higher loss ratio of 91%. Given the need to avoid adding uninsured Iowans to the current collapsing health insurance market, the Office of Consumer Advocacy would encourage the Commissioner to review and consider the effects of reducing the rate increase even further.

Under Iowa Code section 505.19(3), comments may continue to be received until the Commissioner makes the final decision on the proposed rate increase. Any additional comments received prior to the Commissioner’s decision will be recorded on the rate hearing website.

Appendix A: Wellmark, Inc. 2019 Proposed Rate Increase Comments

Ingrid M. - Mt. Pleasant, IA - August 17, 2018

In regard to the proposed rate increase for 2019, I vehemently request no increase as we are already struggling to pay 42% of net income to health insurance premiums and spiraling downward to poverty. How are we expected to continue at this rate when we've already been subjected to astronomical increases since the enactment of affordable care? There must be a more reasonable and fair solution to everyone sharing costs for the uninsured. Taking away from those who have worked hard all of our lives to sustain us in retirement will have nothing at all when that time comes with the rate increases we've already endured and including the proposed 11% increase we may see. Unfortunately, we aren't getting the standard cost of living raise in the Midwest to help balance the appalling increases. We distrust and are very skeptical of the so called affordable care act, and don't want forced into carrying no insurance at all, but can foresee that happening at this rate. Eventually, we'll have to turn to the government for help in sustaining our lives when we'd rather prepare for ourselves. Please enable us to receive reasonable and affordable health insurance premiums. Would you be satisfied with or able to pay 42% of your net income?

Jean M. - West Bend, IA - August 15, 2018

I've had my policy for just 4 years. My rates have been raised every year. Over the last three years, there was a total 42.7% increase. My premiums are \$6000 annually + up to another \$6000 in copay/deductibles.

I'm just about priced out of the market. I'm a 62 year old recently divorced housewife - I didn't choose to "retire" but here I am. This increase would send me toward the welfare line. I want to carry my own weight, but it seems impossible.

I understand that Wellmark's corporate office employees get 50% off their own insurance premiums. I would LOVE to have my own rates slashed 50%. But that's not going to happen.

My pockets just don't get any deeper. In fact, I think they're sewn shut.

I'm against another rate increase.

Matthew C. Donovan - Sioux City, IA - August 15, 2018

Wellmark is asking for an 11% premium raise. I'm 58 years old and I've been paying Wellmark too much for too long. My health history has actually improved over the last 20 years. I don't think I deserve a rate increase. I'm ready to picket Wellmark for their high rates. Who can afford this?

I have individual health insurance because I don't have a job. I don't want Medicaid. I want to pay my own way. I've been paying for insurance for many years now, 7 with Wellmark. I pay \$10,000 a year for insurance; that is not fair.

I wouldn't mind paying \$5000 a year, but not \$10,000! I have no major health problems, and I feel like I'm being punished by having such high premium rates.

The high premium would be ok if I was sick, or taking dozens of prescription medications, or had some debilitating sickness, or needed hospice care. But I don't. This is absolutely ridiculous.

I think Wellmark needs to give their upper management a lower salary and start taking care of the people who PAY those salaries- their customers.

Joseph B. - Monmouth, IA - August 13, 2018

I'm really concerned about this 11% increase. I'm concerned that Wellmark continues to spend money from their customers to put their names on buildings and such and call it "advertising" when if they really just did a good job, they wouldn't need ANY advertising! I'd like that money to be spent to help hold down costs. I'm a farmer, and I've had the same policy for 40-some years. All I get for my loyalty is increased rates every year. Pretty soon, nobody except Wellmark employees and the Insurance Commissioner will be able to afford coverage.

Leesa L. - Creston, IA - August 10, 2018

I feel an 11% increase is ridiculous!!! We already pay \$882.75 per month for premium for two people. It is already a hardship and my 2.5% raise this year won't even cover the increase in January. Where can I go to get a LOWER premium and good coverage?? Help people do that verse increasing costs on us every year!!!

Kimberly A. - Elk Horn, IA - August 10, 2018

Help me understand why you should reward Wellmark an 11% increase as they just received an increase last year and the year before that. In fact, I have never seen my health insurance decrease. My husband and I have been self employed for over 30 years and are very healthy but we continue to give our health insurance company a nice raise each year. Do you know what their reported "medical trends" percent rate increase of 16% even means? Is it that people are getting more well checks? Is it that now they are counting all visits to any medical facility, even nursing homes? Are they including only their medical trend increase or using medicaid numbers and other insurance companies too. I ask you what is the percentage decrease of the price of corn and beans over the past years? Keep in mind, these are the families that pay these insurance premiums. Has there been an 11% wage increase for all that pay for their health insurance? Despite the loss of revenue for farmers we must manage our money, even though inputs for farming also increase each year. Why does managing money not apply to insurance companies? I propose an 11% decrease to promote money management and weed out money waste. If you think that insurance companies still need a raise after you research all their facts and make sure they are not inflated facts, go ahead and volunteer to send me and all producers 11% of your money you spend on every bite of food you eat.

Karen Q. - Sioux City, IA - August 9, 2018

I already pay over \$12,000 a year for one person. And I have a deductible, a fairly decent deductible, and a copay that I pay. I really can't afford to pay any more. They continue to increase premiums annually. I realize that I am getting older but I mean, they also bump it up higher than age would account for.

I do go to my doctor once a year to get prescriptions renewed. Otherwise I don't see a doctor. I have a niece who pays \$300 a month - and she's just 10 years younger than I am (I'm 63).

My new premium will be \$13,600 a year, which is just crazy. I'm insurance poor, and this rate -are you kidding?!? I have farm-related income, but that insurance premium takes a lot of it.

I am against this increased premium request.

Derek O. - Iowa City, IA - August 8, 2018

Wellmark sent me a letter about the 11% increase. They do this every year!

I started insurance with them the summer of 2008 and paid \$308 a month. I currently pay \$980 a month, and the increase will more than triple the premium I was originally paying 10 years ago.

I'm 53 years old, very healthy, and haven't gone to the doctor for sickness for 23 years. My reward for exercising 3 times a week and eating right, doing everything I should, is paying for everyone who isn't.

Car insurance goes up if you drive poorly. Health insurance is the exact opposite! There is no monetary incentive to be healthy. It's the most screwed up system I've ever encountered.

I'm a retired pharmacist. These drug companies are the greediest people on earth. There was a 10 year study done by Health Care for America Now, for the years 2003-2012. The top 10 pharmaceutical companies each made at least 711 BILLION dollars in profit. Nothing is being done to control those costs.

Did you know this? We are the only country that allows pharmaceutical companies to directly advertise on television. These companies spend 19 times more on marketing and sales than they do on research and development. It's unbelievable, how do you stop this stuff?

How can people continue to pay at this rate? This system is broken- it's crooked and corrupt and backwards. How can we change this?

Psych 101 says that whatever behavior you reward, you'll get more of that behavior. It should be mandated that insurance companies incentivize people to be healthy. I'm so frustrated with the greed and corruption in this system. What can we do?

Jon M. - Nichols, IA - August 7, 2018

I truly cant believe you have to jack it to us once again on premiums! Being self employed ,the expense is getting to be overwhelming! Stop all your promotions at Iowa athletic events,and try cutting your own costs for once! Also get our legislative officials to get to working on this terrible problem!The costs are getting so bad that more and more people will drop the insurance. Thank you.

Carla E. - Lawton, IA - August 7, 2018

This rate increase is way too high. I am one of the few who has keep paying my grandfathered plan premiums instead of savings or going on vacations. There was no help with subsidies or anything to pay these premiums. Why aren't the ones who went without insurance getting hammered? Now the government has taken away the ability to deduct these premiums on my income taxes. How many times does the little guy who doesn't get to partake of any of the help programs going to get hit? It's about time you give a break to the people who have given up things in order to keep insurance instead of them having to keep paying more. Let the CEO's pay the uninsureds bills and leave those of us who pay our bills without any help programs a chance.

Katrina C. - Las Vegas, NV - August 7, 2018

I vote NO against an 11% increase on the base premium rates with my Wellmark Blue Cross Blue Shield of Iowa starting January 1, 2019-12/31/2020. My income as a retired individual is not increasing. Please keep Wellmark affordable for individuals such as myself. Thank you.

Gail E. - Bettendorf, IA - August 6, 2018

This is to much. Each year there are extremely high increases.

Mark S. V. - Clinton, IA - August 6th, 2018

On August 18, 2018 Wellmark is proposing an 11% rate increase. I have never filed a protest before but this time I can no longer remain silent. I am a self-employed individual that has been paying the husband/wife rate for an individual plan with Wellmark since 2001. Since my company has just my wife and myself for employees we are not large enough for a group. For years I felt the rates were fair and the coverage provided was excellent.

However, since the ACA talk began and then was implemented our Wellmark rate steadily increased.

4-1-2008 monthly rate \$ 736.60

4-1-2009 monthly rate \$ 809.60

4-1-2010 monthly rate \$ 890.10 - I increased deductible from \$1250.00 to \$1750.00

4-1-2011 monthly rate \$ 992.10

4-1-2012 monthly rate \$ 1198.30 - was able to move from Alliance Select Comprehensive to Alliance Select Enhanced with \$3000.00 deductible within Pool#4
Premium reduced to \$796.80

4-1-2013 monthly rate \$ 899.90

1-1-2014 monthly rate \$ 942.80

1-1-2015 monthly rate \$ 998.00

1-1-2016 monthly rate \$ 890.60 - was able to increase deductible from \$3000.00 to \$4200.00 within Pool#4 (No further deductible increases are available within Pool#4)

1-1-2017 monthly rate \$ 1160.40 Grandmothered plan

4-4-2017 Notified my pre-ACA plan will renew for 2018

1-1-2018 monthly rate \$ 1262.60 Accident rider removed by Wellmark)

Notified that effective 1-1-2019 new rate proposed to be increased by 11% (\$1401.48 per month (\$138.88 additional per month) (\$1663.63 per year increase))

Notified Wellmark no longer offers individual plans such as mine for sale. But coverage continues through 2018.

For years my insurance costs were what I considered fair. with the advent of the ACA insurance costs have gone out of control. In Clinton where we live the three doctors that my wife and I go to in Clinton and the Quad Cities do not accept ACA policies. So if we did not have this policy we would be forced to go to the University of Iowa or some unknown Doctor for care.

There is only 1 insurance carrier currently offering ACA policies in the State of Iowa. There rates are extremely high and coverage is less than what we currently carry and we can not go to our usual doctor.

Wellmark is causing the rates in our pool#4 to increase as they are not accepting any new policies which would help to spread the risk and cost. As we grow older our health care needs increase but without younger people being added to the pool the few that remain are being forced to bear the brunt of the cost.

Please review carefully all the rates charged by Wellmark the company makes huge profits each year and can spend millions for a new building that they appealed the property tax assessment on so they would not pay their fair share of taxes to the State of Iowa.

The small businessmen of this country is what makes this country great but the high cost of insurance is forcing them to go out of business or drop health insurance all together.

Think about this: What would happen to your income level if you had to write a check for \$3787.00 every 3 months (based on current rate not proposed increased rate) just so you could keep your health insurance? That's the check I write every 3 months so my wife and I can have health insurance and then if we do need to use it we have a \$4200.00 deductible.

And now think about that if you allow this 11% increase the quarterly check would go to approximately 4103.00 for 3 months. Few will be able to afford the premium. Wellmark will basically push us all out of pool#4.

I know my wife and I cannot not afford this. I will be turning 62 in November and she is 58. We have seriously discussed dropping our coverage and hope I stay healthy for 3 years to make it to Medicare. We can not afford over 16400.00 per year for health insurance when our Gross income is \$45000.-50000.00 per year. That would be over 30% of our income going to just health insurance, We would be further ahead to drop health insurance and if one of us got sick simply file bankruptcy and let the State pay for our health care with Medicaid.

Rational people make rational decisions. I know if you give this serious consideration you will realize it is time to say "NO" to health care premium increases.

Thank you for taking the time to consider my concerns.

Mark S. V.

Daniel E. - Davenport, IA - August 6, 2018

Absolutely ridiculous. If your think we will continue pay these prices your gravely mistaken!

Marcia G. - Dubuque, IA - July 31, 2018

We're a farm couple, and we've always had to buy our own insurance. My husband has social security now and my insurance costs more than his ss check. It's ridiculous when you have to pay so much! We've had to increase our deductibles just to afford the bare minimum of coverage. Last year I needed 2 surgeries, and now we're \$32,000 out of pocket.

This has eaten up our life savings - we can't afford that. So many things are not covered, so we don't use insurance that much except for emergencies.

We've worked so hard for so many years and have very little to show for it for our retirement- please consider that when you raise the rates for people who are 55-65 years old who can't afford coverage.

My plan doesn't even cover therapy for depression because of my thyroid disease. There's nothing I can do but wait it out until I turn 65.

Wes B. - Fairfax, IA - July 31, 2018

We find the medical insurance industry has been set up to fail, the government wanted single payer health plans. Insurance companies cannot survive with increasing their prices, but then We are effected by huge increases in our premium. I once was told you should pay about 5% of your income on health insurance, well we are looking at 30-40% of our income.

Few thoughts:

We are extremely angry at the rate increase!!

First, yes only Democrats voted this bill in, but a few Republicans kept the bill alive!

Thanks President Obama for telling us we can save \$2,500 per family... lol

Gutless Republicans that did not have the nerve to repeal this law- how pathetic they all are to vote for a law that was doom to fail.

Find ways to reduce medical costs, this is killing us.

Lastly, we are a Capitalist country based on free enterprise and competition let that flourish.

Find ways to reduce cost, and you will have our business, otherwise we have to go elsewhere.

Reduce your rates for at least one year, see how that works. Thank you, sorry for my rant.

Albert R.- Neola, IA - July 30, 2018

I know I can't get a 16% increase! I pay for insurance myself, and I have to have insurance because of the government mandate.

I'm over a barrel. Things are getting out of hand. If you have a house and insurance bills, they can take away your house. How is that legal? How do we change this? I don't know what I can do here. \$600 a month- that's more than my house payment.

Insurance companies have the most beautiful buildings in the enter city. I'm outraged, and things are only getting worse. The rich keep getting richer and the little guys keep getting taken advantage of.

I work for an employer with less than 20 employees, in the trucking industry. I have to have individual coverage, there's no way around it.

Say no to the increase.

Barbara K. - Dubuque, IA - July 29, 2018

We love Wellmark insurance but with rising costs, it is difficult as a single parent to maintain a rate increase. I am in a group plan but within that plan I am not able to afford the family plan. So, my daughter has her own insurance plan. Please keep the rates the same. An increase would be a major financial problem. Thank you for your time.

Bill W - Des Moines, IA - July 25, 2018

Wellmark wants an 11% raise and this is the 4th one and I think the the Commissioner should know allow this.

Wellmark put a bunch of people from Aetna in my pool so that increased rates. That's not right! I'm about ready to drop them, because I can't afford to pay \$700 a month.

Nancy L. - Ames, IA - July 25, 2018

I am the care giver for my son Paul L., an Ames resident. Paul, a self-employed professional musician, has purchased individual insurance for 25 years. He began with Wellmark and paid premiums that ever rose. Two years before his coverage was cancelled, he paid premiums of about \$25,000 a year. Wellmark cancelled that policy in 2016 --he had been grandfathered in this plan, however, that did not make a difference. He was forced to take an ACA plan--he took no subsidies. Then, in 2017, Wellmark left the entire individual market, leaving Paul with the option for Medica. He currently has a Medica policy with much lower premiums than Wellmark's \$25,000. And Medica has proven to be a responsive and caring company.

Paul is now older and has health concerns--Medica approved his treatment at the Mayo Clinic when his Ames doctor recommended a second opinion for his condition. It may have saved his life and at the very least he did not have to have an implanted device.

Giving Wellmark special consideration of any kind is hard to take after they showed no concern for clients of a quarter of a century. We thank Medica for the insurance that Paul now has. Hopefully it can continue in 2019. Who needs medical insurance for average ailments? It is people with concerns that need to be covered. All the premiums Paul paid for 25 years would surely have paid for his current care! Just when he was at an age when health can decline, Wellmark gave him no consideration for his years of loyalty to them.

Carol S. - Atlantic, IA - July 25, 2018

I don't understand the increased premium rates when my health has been great. I think they should look at individual policies and then decided. Cost of living doesn't go up that much and I have not had an increase in my wage in 4 years. How is the 'little' person suppose to absorb these increases?

My vote, do not raise rates.

Thank you,
Carol

Mari L. L., - Spencer, IA – July 23, 2018

I am a single working woman, 1 full time and 1 part time job. I pay for my own health insurance as none was available or offered at my current employer. My raises are few and far between. How can you justify an 11% increase when some of us have not seen a pay raise of 11% in 10 years. Health care costs are out of control no matter where you look. It is time to get them under control and make it affordable to one and all.

Marcia G. - Dubuque, IA - July 23, 2018

We've always had our own insurance. My husband is on Medicare now, and I am 64 years old. We're a farm family, and currently our insurance costs more than my paycheck. I work 40 hours off the farm per week.

The insurance doesn't even pay well! I had to have two surgeries, and our out of pocket expense was \$32,000. It's ridiculous.

Paying for insurance has eaten up our savings. We can't afford that and so many conditions are not covered. We don't use our coverage much unless it's something very serious.

I have depression because of thyroid disease, and that's not even a covered expense. I am trying to hang in there for another 8 months until I turn 65 and can get Medicare.

Please consider people in the 55-65 age group - we work hard, but we can't work forever. I've paid premiums for years and years, and it seems like my faithfulness is not being rewarded. Quite the opposite.

Please help us and don't approve such a high rate increase.

Gayle H.- Anonymous City, IA - July 20, 2018

I'm stretched to the limit! I've had very few claims, I should be getting a credit, not paying more!

Dave C. - Anonymous City, IA - July 20, 2018

I just want to go on the record as opposing a grossly huge increase - 16% is what they're proposing. It should be zero, because they've gotten away with too much in increases in the past. There's no way people can keep up with these payments.

Jeff L. – Sergeant Bluff, IA – July 18, 2018

Health insurance premiums continue to go up at rates way beyond that of what the average middle class family sees in wage increases. I have received between a 2 and 3 % raise each year over the last 5 years, with this year being a very modest .55% raise. WellMark continues to raise premium rates at 10-15% every year with no end in sight. Most years my modest raise is "eaten up" by WellMark's health insurance hikes. This year I am taking a pay cut when it comes to my net pay. It needs to stop and something needs to be done other than double digit rate increases and the company line of, "We do not want to raise rates, but we have no choice but to because of the cost of medical procedures and prescription drugs. " I am not putting all the blame on WellMark. I would like to see WellMark sit down with the big players in the medical field to come to some compromise on stopping the ridiculously high costs of medical care.

Thank you.

Mike M. – Spencer, IA – July 18, 2018

We are a small farming family and we are currently have 2 individuals insured. We currently pay over 12.4% of our income to Wellmark and have not made a major claim in the past 3 years. We have born a 10 % increase in insurance expense each year and family farm income has decreased over 20% annually for the same period. All farming input has increased as well as other living costs. We ask that the economic situation of many of the independently insured, self employed individuals be considered when looking at this premium increase and choose a lesser % increase.

Christopher H. – New Hampton, IA – July 17, 2018

There are only two of on our insurance policy, and we are paying over \$18,000 annually. Why does Wellmark feel the need to continually raise prices? This is the question you seriously need to ask yourself. Healthcare prices are increasing, but if you would stop to look at the situation, your're part of that problem, not the solution. Start finding solutions to bring healthcare costs down, not feed into it. Eventually, no one will be able to afford health

insurance. Maybe, Wellmark should look for better options/solutions to help make healthcare more affordable. Definitely against a price increase!!!!!!!!!!!!!!

Anonymous – Sioux City, IA – July 16, 2018

To Whom It May Concern:

Wellmark is proposing an 11% increase ---- NO!!! How much attention has the Consumer Advocacy Office paid to these increases in the past when it comes to the insureds who will either be paying the increases or forced to drop their coverage when they can no longer afford it.

Consider also that the ACA offers very poor options for Iowans as well * I know of a person who only ACA option was a policy that would have cost \$16,000 a year for 1 person (it was unaffordable) who is waiting for Medicare but still has a few years to go and no major medical coverage).

For most people an 11% increase isn't affordable – our wages don't keep pace with it, along with everything else that increases.

It's getting to the point where you're afraid to use the insurance - especially when you consider the premium PLUS the deductible – as I have had for a few years in a row due to cancer.

If we have to tighten our belts even more, or increase an already high deductible, or skip recommended test/procedures, or drop coverage – maybe Wellmark (including the doctors, hospitals, drug companies, etc) should be more aware of our limits, too!

Sincerely

A concerned Wellmark insured

Kelly C. – Dubuque, IA – July 14, 2018

These rate increases can not continue at this pace. Health insurance is our families greatest expenses at this time and there seems to be no end in site.

Michael E. – Corydon, IN – July 13, 2018

I have private High deductible health insurance plan with Wellmark. I moved out of Iowa and kept my Wellmark plan. I was grandfathered in when Obama care came into being. I was able to keep my private health policy. I do not work in a place of business that subsidizes my health premium. I am considered to be self employed. At present, I pay \$3883.20 for three months. That is \$1294.40 per month. If there were an 11% increase, my cost would increase by \$427.15 making it \$4310.35. That makes it \$1436.78 per month. That is an increase of \$427.17 per every three months. Or

\$142.38 every month. My premium has increased at a very high rate over the last eight years. I cannot afford the cost of this increase! We are a single income family, and at the present, almost half of my salary goes for the price of insurance. Please do not allow this increase to happen! I really can't afford health insurance at the cost that it is now. Thank you for your consideration.

Deb C. – Ames, IA – July 12, 2018

As a healthcare provider, I have watched my reimbursement by Wellmark rise by approximately 1% per year for many years. As a private individual covered by Wellmark, my monthly premiums to cover only myself have gone up 55% since 2010 and 79% since 2000. If reimbursement for my professional services increased at about the same rate as premium increases, I would not complain. I am unable to obtain group health insurance through an employer or through a marketplace exchange, so must pay full price out of my own pocket. If Wellmark's proposed 11% increase goes into effect, I will pay \$902 per month for one person. (Note: I am very active, do not smoke, and have minimal health problems.)

Mark M. – Anonymous City – July 12, 2018

Well, Iowans voted for TRUMP who oversaw the dismembering of ACA. So now 26,000 Iowans quit buying health insurance. First of all, it is IOWA so no one cares! Second, they got what they deserve! Let us pray that each of these 26,000 contract cancer and suffer unimaginable pain until they are called home to HELL! Yes, elections have consequences! Hope that number increases to 260,000!!!!

Wayne H. – Scarville, IA – July 11, 2018

I took out my current Wellmark policy 1-1-2014. It cost \$4,332.00 . My current cost for same policy as of 1-1-2018 is \$6754.00. My premium has increased 56% in 4 years. This is unacceptable as the premium increases have outstripped my income growth by 30% or better. The percentage of my income that goes for Health Insurance is way out of proportion to the rise in other expenses. This is unsustainable and these excessive premium costs have to stop. Why does health insurance think they have a signed blank check to just continue raising premiums regardless of current economic conditions.

Kevin H. – Perry, IA – July 11, 2018

After receiving the notice of yet another requested rate increase by Wellmark, I feel compelled to comment to the Consumer Advocacy department to express my disapproval of this proposal. It seems to me that these requests are becoming too frequent. These large insurance companies are avoiding their part to risk management by reducing coverage, grouping too many different people with too many different risk factors together and dumping the costs and risks upon the consumers. The letter I received states that everyone in our rating pays the same...but they use individual

ratings to set final premium rates. This is not right...if someone in our rating is struck with a health issue everyone in the rating is punished with a higher premium? Where is the fairness in that? What happened to the pooling of people to offset such unfortunate seasons in ones life?

Health care costs are breaking families across Iowa and across our nation, someone needs to step up and say NO!

In as much, each year it seems these insurance companies are building or a remodeled structure to house their company and its workers that are extremely extravagant beyond anything needed to run their company. These fabulous structures most definitely drive up the administrative costs for Wellmark too...and at the consumers expense! I understand that these insurance companies technically do not use premium monies to build the buildings they work out of, however they use premium monies to invest then take the monies earned off the invested premium monies to build/remodel these office complexes. If the insurance commission allows these insurance companies to invest premium monies from the insurance companies customers, the people who are forced by law to carry insurance under the health care reform act, then it seems to me that the insurance commission or whomever has the power to do so should require these large insurance companies to use some of the returns from these investments to cover some of the rising costs in health coverage. Why should it all fall back on the consumer?

My family and I have been purchasing coverage from Wellmark for many years, each year it seems the rate increase or the coverage decreases. Our family is becoming insurance poor! We are a fairly healthy family, blessed and thankful, and our health insurance cost us more than \$18,000 per year! Now they are asking for yet another increase? The proposed increase would add nearly another \$2,000 per year! When does it stop?

Our family, like many others have been forced over the years to increase deductibles, and change coverage plans just to be able to afford health insurance coverage. This must stop...Insurance is a risk management pool. These insurance companies, hospitals, health care providers must take responsibility also and absorb some of the risks and costs of rising health coverage...this cannot all be put on the consumers. I urge you to deny Wellmark permission to increase rates and work with them to reduce expenses that add to the costs of doing business. Thank you.

Janice M. – Corning, IA – July 10, 2018

I feel the insurance companies are raising the premiums to such outrageously high rates that the consumer is going to have to choose between health care or no health care. For years I have worked in the health care field and seen how how the system has been abused by people who could work and pay for their health care have been supported by the government and we who worked where penalized by paying for your health care and theirs . It is not right that people who work hard, pay their taxes and live within the laws of our country are forced to keep paying the premiums. Why not stop giving all congress and senators at state and federal levels the notice that they no longer get free health care for life. No better job than they do they don't deserve it. I say no to premium increases.

Robert – Cedar Rapids, IA – July 10, 2018

Governor Reynolds Has been stating over and over again on how we should make health care more affordable, no more talk. Wellmark has steadily increased its rates with no resistance from this governing body. I cannot even get a pay

increase every year, let alone 2.5% if I do get a raise. Yet every year Wellmark gets their increase, but then also takes away some benefit, so we pay more and get less. Last years increase was quiet large and one of the biggest reductions was the loss of the accidental coverage to my policy. Since every increase is based off everyone's original rate, then that loss should be deducted from the base. In math I was taught $5 \times 0 = 0$. I have no doubt this board will allow Wellmark to proceed with this requested 11% increase, at least make it fair and require them to remove the accidental insurance costs from the base rates permanently before multiplying. I should not have to pay more based on something that is no longer available to me. Again anything times zero should be just that, zero.

Deductibles are at such a ridiculous high rates for many people through their employers they don't go to the doctor and seek medical attention, because they simply cannot afford too. An individual should not have 5000 dollar deductible or a family 12000, what is the point of insurance? Something that could have been caught early and save everyone money including insurance companies, now gets caught later and treatment becomes more costly. Before saying yes to this 11% truly stop and consider how that 11% will effect everyone's income and the growing strain on families and individuals to be able to afford food, housing, or affordable health care.

Thank you

Steven B. – Marengo, IA – July 7, 2018

Dear Iowa Insurance Division,

The reason I'm writing you. Is about the 11% rate increase of health insurance premium of Wellmark Blue Cross Blue Shield of Ia. "there should be not a rate increase!" Because, Iowans are having a hard time paying these very high rates; also, Wellmark Blue Cross Blue Shield of IA Has \$1.2 billion in the bank and really don't need the money. Its costing me in health insurance & dental Insurance is \$5,094.00 per year and I really don't want to pay that very high amount. And also the 11% increase." Some Iowan stop having health insurance, because of the very high rates! The rates should be lowered. So Iowan's can afford health insurance. What is costing me now in very high health insurance? "The State of Iowa and Wellmark BlueCross Blue Shield of Iowa better go find me a high pay job!" to pay these high rates! And I really need a lot of things! Like a new vehicle to get me to work so on:

Sincerely,
Steven B.

PS: "I really need the money and win the lottery."

Diane M. – Dubuque, IA – July 6, 2018

I am writing this message as a response and opinion regarding health insurance rate increases for 2019. I will tell you that insurance premiums are becoming a real crisis in our household. My husband is 64 and will be 65 in February. I just turned 63 this past May. He will start Medicare in February and I will have a bit more than a year to wait. As of today, we are paying \$1760.00 per month for our health care insurance as a private pay, and we are generally healthy

individuals. That totals \$ 21,120 for the year 2018! There is no reimbursement for not using the policy and there is no write off on income tax at the end of the year. Health insurance is a funnel that simply is bleeding us dry!

We have again received notice that there has been a request to raise premiums by 11 percent. We CANNOT afford anymore. At this time my husband's social security check all goes for the health insurance premium. His pension check goes for all other living expenses. We have no house payment or car payment. We could never afford extra payments. He works 2 days a week for our pocket money for entertainment. Well, if the health insurance premium goes up again, guess where the money comes from? Our entertainment fund which is generally a meal out once a week.

I have made the decision that if the premium rises again in January, my husband will go on Medicare and I am dropping health insurance and taking the chance I can make it the 15 months with no big event. If something big should happen, then it's just the way it has to be. A person can only be squeezed for so much. I know I am done with the anxiety this creates. A question I have, is why doesn't Wellmark have a plan that puts all private pay individuals into a group plan for the private pay? Why isn't any portion of our premium returned at the end of the year when we have not utilized the plan?

I am done making the insurance company CEO rich. I have read about the huge bonus the CEO of the Iowa/South Dakota BC/BS gets! It is shameful and he should be ashamed of himself. I never thought there could be so much GREED, but there never seems enough! The skies the limit for the wealthy CEO's of this country! Please STOP this from happening! I am confident there are many who are in this same position. Our only hope is this Insurance Commission truly takes this information into consideration when voting on this 2019 request. It is time Wellmark start making some cost saving measures from the top down.

Diane M.

Bradley F. – Bettendorf, IA July 6, 2018

Don't increase my rates. I can barely afford it now and I hardly have ever used it. Where is the cap on this?

Renee B. – Elma, IA – July 5, 2018

Enough is Enough! This rate increase should not be allowed or any rate increase for the foreseeable future. We have always had to pay for our own insurance. I am tired of being penalized because I don't work a full time job that offers insurance benefits (I work two part time jobs and my husband farms 300 acres) or work for the government and have the tax payers pay for my full coverage insurance like Senators and Representatives while they sit back and do nothing to help out those of us forced to pay outrageous premiums. Maybe it's time for these Senators and Representatives to earn the tax payers money and go after the system that encourages the medical establishment to charge exorbitant fees and then charge those of us who have no choice in the matter to pick up the tab.

Darrell W. – Cedar Falls, IA – July 5, 2018

Dear Commissioner:

As a concerned citizen and a hardworking businessman I would urge you strongly too deny any insurance premium rate hike, such as the 11% hike that Wellmark Blue Cross and Blue Shield is asking for, please just say NO!

Why, you might ask, because these rate increases are happening far too often, as a former insurance salesman and CEO I have seen the fear and despair in the eyes of my clients as they learn that their insurance premiums are going up yet again and can do nothing about it at all!

As consumers we need to stand as one and let our voices be heard, that we will not tolerate any more premium rate hikes in the future!

The American people deserve better when it comes to health insurance in this country, we must keep working to make sure health insurance is affordable to everybody, so I say again Mr. Commissioner, Please just say NO and everybody will be in a much better place than they were before!!!

Sincerely,
Darrell A. W.

Anonymous - July 5, 2018

They would not have to have increase's all the time if they would stop the New Billion Dollars Building they are putting up all the time. They also could let go those \$100,000.00 employee's they do not need. Get down to base needs they got to high of labor & to many sitting on *** doing nothing. For the premium payed they pay very little. POOR MANAGEMENT.

Carol O. – Sumner, IA - July 5, 2018

To Whom It May Concern:

I want to make an appeal to your office to take a separate look at the insureds who have a Health Savings Account. People with Health Savings Accounts with high deductibles are paying for the day-to-day medical expenses that are incurred, therefore, reducing your risk that Wellmark will even have to pay any claims on their behalf.

Health Savings Accounts should not be lumped into the same statistics as insureds with a co-pay. My husband and I have had an HSA for years and only 1 year has Wellmark paid any claims on our behalf. We should, therefore, not experience the same rate increases as others. Please separate HAS insureds from others when determining if and at what percent our premiums will raise.

HSA clients are taking responsibility for their own health care. Since we are paying the bills, we are careful and cost-conscious with our health care choices. Please acknowledge our efforts by taking a separate look at any rate increases that may be evaluated and considered.

Sincerely,
Carol O.

Keith J.- North Liberty, IA - July 3, 2018

My individual insurance rates have been going up approximately 10% per year since I enrolled eight years ago. I realize I am grouped with a myriad of other individuals, but I have not "used" my insurance benefits to any great extent over those eight years. I've already had to change my benefits package (deductibles) to try to mitigate that sharp rise in premiums. I am currently paying well over \$6,000 per year to Wellmark BCBS and have approximately \$300 per year in claims. I realize insurers must make money, but there must be a more equitable way to administer premiums reflective of the "individual" in an individual plan.

Until that happens, I oppose large wholesale increases in premiums. Thank you for listening.

R. B. - Des Moines, IA - July 3, 2018

I'm tired of - every year- at least 10 years, the rate's gone up EVERY year, SIGNIFICANTLY. I don't mind if everyone with Wellmark insurance was affected, but why should my individual coverage be singled out?

So this year my rate will increase by 11% . I'm already paying \$12,000 annually, another 11% makes a yearly premium of \$13,320. Totally unaffordable, but what other choice do I have?

I read the "What causes rates to change?" part of the letter I received, and none of the things applies to me! I don't have a difference in coverage or benefits, I don't have family member changes, I don't have a location change, I don't use tobacco, and I don't have any changes to network coverage/discounts. So why the increase? Pretty much all I use is dental coverage. I'm thankful I kept my grandfathered policy, or things might be even worse. I oppose the rate increase request.

Rochelle T. - Glenwood, IA - July 3, 2018

My son is 24 years old, we pay for his health insurance. My husband and I are both disabled, and husband is blind. I'm against the proposed rate increase.

We're gonna have a proposed base increase of 11%. Isn't that quite ridiculous? My son is in an age group where he shouldn't be having increases, period!

I pay enough the way it is. I don't know what we're paying for. My son is healthy as a horse, he's in college. We shouldn't have to pay for all these people that don't have insurance even though it's mandatory. Giving them free insurance, I'm sure that could be part of it. Totally ridiculous.

I think we've already had an increase this year. I don't know - you're going to push it to where all these healthy people can't afford insurance to give people that don't have insurance, increases. It's one lie after another.

My son is trying to go into physical therapy, he exercises every day, he eats healthy. What more does Wellmark want? I mean, my God! Quit increasing health insurance. Is it the CEOs, or who's getting all the big money around here? It sure isn't us.

I don't understand the rate increase factors. Why would geographic location affect premium prices?

I just pray to God that this doesn't go though.

Dr. David H. - Marion, IA - July 3, 2018

I am against this rate increase. I'm a provider for patients using Wellmark insurance and I have a Wellmark policy myself. I'm not getting a 16% raise based on "trends", why should my insurance company get one?

Brian C. - New Vienna, IA - July 3, 2018

Every year I get the same letter, it's just a different amount of increase. It's getting ridiculous. I'd like to be buying a house, but there's no way I can afford it because of my health insurance payments. I'm a self-employed carpenter, and I have to have a truck for my business. The payments on the truck are less than my insurance payment!

I don't know why they call it the Affordable Care Act - who can afford this besides people on welfare? The average income increase for a working American family might be two % a year if they're lucky, how can 9% or more be reasonable?

Margaret - Jefferson, IA - July 2, 2018

In 9 years, our premiums have tripled. A \$1700/month premium for a family of two is not affordable. We haven't gotten any improvements in coverage without premium increases, no additional benefits. We're both self employed, 54 years old. We hardly use our coverage except for regular checkups. We own property, and it's hard to see our tenants live off the government and go to the doctor for every little ache and pain, when we can't afford to go see a doctor when we're really sick.

Also, why is Wellmark sponsoring sports teams and community events? That money should be going towards keeping costs at least level for policyholders if Wellmark can't keep up with their cost of doing business. They should get some common sense regarding the salaries they pay the big shots, too.

L. L. - Wadena, IA - July 2, 2018

We're self-employed in a farm-related business, and this proposed increase is just too much. We've put 4 kids through college, and pay \$1900 a month for health insurance now. We've always paid our insurance bills on time and this increase is just about ready to break us. We say NO to the increase.

Steve P. – Bettendorf, IA – July 2, 2018

I am sending this message as part of a public comment on proposed health insurance rates for 2019. My wife currently has an individual health policy from Medica. She is 60 years old and does not qualify for any government subsidy. Her present monthly premium is over \$1400. We are on a fixed income.

Please do not approve any rate increases for 2019 for Wellmark or Medica above 5.6 percent increase for individual policies on or off the exchange.

Thanks,
Steve P.

Jane - Muscatine County, IA - July 2, 2018

I'm against the rate increase. They're a good company, but premium increases are constant and excessive. Wellmark appears to be doing well from what I see of their financials - a 250 million\$ building (that came the year premiums increased 18%) and a chairman/president with a salary of 3.1 million dollars a year. And then they cry poor and increase premiums for all the policyholders!

Here's the information I've been able to find online. In 2010, there was an 18% premium increase. In 2011, an 8.5% increase. In 2012 it was another 9.4% and in 2013 the premiums increase between 12 and 13%.

We are a self-employed farming family. My son pays \$8,000 a year to cover just himself. You read about farmers committing suicide - this is one of the reasons why. These premium increases are totally unaffordable.

I also read that Wellmark holds a reserve of 1 BILLION plus dollars- is that necessary? If claims go down, does the reserve also go down, and who benefits from the excess? You can bet it's not the policyholders.

Jeanie S. - Defiance, IA - July 2, 2018

STOP THIS INSANITY !!!!! We are an aging, extreme small family farm income, adults, struggling every month to make our payments from a few acre farm and livestock operation. This increase is most likely going to push our living expenses beyond what we can pay since we have reached the limit now!!! We all know what the outcome of not having health insurance will do to an individual but the saying is "you can't get blood out of a turnip" meaning there is no way to squeeze another cent out of our income to pay more for insurance. Yes like many "we are insurance poor/ can't live with it but can't live without it". From what the future looks with this increase, it will be live without it and stop any medication that does get paid by insurance coverage. Not looking for pity here, just stating fact many small family farmers are facing today. Yes we have taken jobs off the farm as well but at our age the opportunity to work a job for wages large enough to meet the expenses in our area is not available. Please take into consideration all those doing their best to meet these demands by the insurance companies, and help us fight the rise in health insurance fees. Thank you.

Troy E. - Davenport, IA - July 2, 2018

At some point, everyone including the single individual, family, organization, small business or large company has to take actions in order to operate their budget more efficiently. In this case, I would ask that the Iowa Insurance Division DENY any further rate increases for health insurance companies until they submit a comprehensive plan showing where and how they will be implementing cost cutting measures. Possible cost cutting procedures could be wage freezes or cut-backs, clerical savings, lobbying for less comprehensive cost effective policies, giving rate increases/decreases based on patient wellness exams to encourage good health just to name a few. For myself and others, when health insurance premiums are increased this acts as a wage freeze for myself and my family as it causes for less expendable income which could go towards other life expenses. I feel it to be completely fair that insurance companies submit a comprehensive plan as to where and how they will be more streamlined. At some point if rates keep going in the direction they have been, at the speed they have been, health insurance will become unaffordable to many. The insurance industry attempts to show merit for their request for an increase. How about they be forced to show where they can cut back and save so these increases don't continue at the percentage rates they have been?? I didn't receive an 11% pay increase in the past fiscal year. I would be willing to bet that most people and entities that are effected by this 11% request didn't either, including yourself as you read this. I would ask that health insurance companies, financially speaking, tighten their belts like the rest of us have to.

Janet A. - West Point, IA - July 1, 2018

This has got to stop! Health Insurance is not affordable! I have had a rate increase every year since I purchased this insurance. I now pay \$626.85 a month last year my premium was \$565.35 a month this amounts to over a 10% increase from last year. Unbelievable that they now request yet another increase!!!! PEOPLE CANNOT AFFORD THIS TYPE OF INCREASE ANNUALLY! Please have a heart and deny this increase.

James H. - Cedar Rapids, IA - June 29, 2018

While I am not against rate increases when warranted, I have noted this will be several straight years that rates have increased by more than 10%. If I understand things correctly, an insurance company has to limit their administrative expenses to 15% of total premium payments. While I do not know if Wellmark has done this, there is a trend overall that insurance

companies are using to shift administrative costs to the actual patient care costs. This has been done by introducing Third Party Authorization companies. There is no incentive to holding down the cost of these companies, since it shifts into patient care cost and can therefore lead to a premium increase. I would be interested in understanding whether this is happening at Wellmark. In addition, what is the state of Iowa doing to implement standard transactions? Insurance Companies and Healthcare Providers use the same forms-claims, claim status, ERA/EFT, patient eligibility, prior authorization and claims attachments. X12 has provided written instructions which CMS approved. And yet AMA is reporting 1,200 different sets of written instructions exist for these forms across the US.

The 2017 CAQH Index Report indicates \$11.2 billion in savings could occur if insurers were pushed to utilize these standard forms. Finally, I know that Wellmark is becoming more proactive in implementing online forms like prior authorization. These forms can only be accessed through their website. If their formats were made available to clearinghouses, electronic health records and practice management vendors could map data fields to not only Wellmark's forms, but other insurers forms as well. This would eliminate quite a bit of duplicate data entry on the provider side and would probably assist Wellmark as well. As a consumer, I have a high deductible plan and it is rare when I use premium funds, yet my rates continue to climb and things seem to become more complicated in this process every year. Thank you for taking time to solicit my thoughts and to read/review them.

Carolyn H. - New Hampton, IA - June 29, 2018

The last time I voiced my concerns, it evidently went right in one ear and out the other of those who are making the decisions. I am appalled at the continually rising health insurance costs and lack of human empathy by those operating the companies. When is Enough Enough? My husband and I are presently paying close to \$18,000 annually for health insurance. REALLY?????

Other concerns are that our plan is written in such a way that basic preventative care is not covered. When reading the policy, there is a clause in the "Covered" section stating that a certain item/procedure is covered, only to find out that in the "Not Covered" section there is a clause written which negates the clause in the "Covered" section. It's like trying to fight the IRS when trying to receive coverage for certain items/procedures. Wellmark should be ashamed of themselves for taking advantage of those of us who aren't out to take advantage of the system, and solely want health coverage for which it was intended. Wellmark needs to come up with a solution to turn this around and make policies affordable. I hear rumors that Wellmark just wants everyone to drop the old plans, or just basically drive people away. I can't understand why this could even remotely be true. Why not start being humane and take a first step at lowering costs.? Have a heart and STOP RISING HEALTH INSURANCE COSTS.

Treasa C. – Ankeny, IA – June 29, 2018

seriously? raising our rates again after we just paid our health premium. our health insurance for the year is \$24,000+. we just paid our 6 month premium of \$12,000+ last week, now we get a notice of increase by 11%. this is unaffordable. our health insurance covers the 2 of us for a year and yes, I am glad we have it. but the costing is out of line to people's wages.

Chris & Yvette C. – Fonda, IA – June 29, 2018

We are writing to you today to be heard on the subject of the most recent rate increase for base premiums of 11% for 2019 with Wellmark Blue Cross and Blue Shield

We are Self Employed business solo propriety who pays out of our own pocket every dime to have coverage for self and family in which over the past four years has increased our annual premium some ((\$4,712.40)) while ((nothing)) has changed with our policy, geographical area or health. The new 11% rate will increase our annual policy from ((\$13,243.80)) to making out annual policy ((\$14,700.00!!!))

Just 4 years ago our annual premium was \$8,531.40. Over the course of four years we have had a right to make a public comment. I hope that our public comment is heard this time, I do not know how we can continue to pay a premium such as this with rates increasing annually in outrageous amounts that are more than a mortgage payment! I strongly urge a halt in these premium increases in which we cannot afford to continue doing business with you with rates like this. This is getting ridiculous! We say NO to any more increases.

Thank you for hearing our comments.

Chris & Yvette C.

Larry P. – Carson, IA - June 28, 2018

My wife had emergency Back Operation, it turned out well. Upon receiving the bill we learned we owed about \$4,500.00 that insurance paid about \$11,500.00. The bill was for \$45,000.00, the difference was written off due to a contractual price agreement.

The Physical therapy that followed was paid in full by the insurance company. Another option was later in the day after agreeing to the only one available in the morning. We did not have knowledge of the contractual pricing for the physical therapy. This was our first experience with the money on a major health issue. If we had knowledge of the contractual pricing lower than the standard charge, the choice may have been different for the physical therapy, this amount was about \$20,000 and no contractual discount existed.

The price of health care is going up faster than incomes, mathematically it cannot continue on this trend line for ever. Eventually only the top 10% of the population are getting 70% of the income will be the only ones getting health care.

The Proposed Base Premium Rate is 11%. Soon I will be on Medicare. Then these kinds of rate increases become my children's burden. I am thankful for my wife's recovery. Mathematically health care cost increases of 11% a year are not sustainable.

Maybe the new technologies and drugs need to be developed for reducing cost and improving outcomes and not just for a blank check for improving outcomes. The baby boomers have always created a market and it will not always be the case. When looking at the trends consider the sustainability of the current trend and when it will change.

Thank You for your time, there is not magic answer, just need to squeeze out a dime here and there and still have the same outcomes.

Larry P.

David H – Marion, IA – June 28, 2018

Dear Consumer Advocacy Office,

Recently Wellmark of Iowa has asked to raise the premium of insurance by a factor of 11.0%. They site an increase in "Medical Trend" of 16%. CMS States that Private Health Insurance spending grew 5.1% in 2016 as cms.gov. They project increases of 5.5% I am in a grandfathered policy and switching here in Iowa I have little to no choices at this time. I feel this rate hike is exorbitant and I would recommend refusing this. I am also a provider here in Iowa and I doubt the medical trend is to increase payment to physicians by 16%. I would encourage Wellmark to lessen the profit margin and ask for a smaller raise.

Sincerely,
David H.

Sören A. – Des Moines, IA – June 28, 2018

Wellmark is asking for an 11% increase in one year. Indicating that it expects health care expenditures (or Medical Trend" as they refer to it), to increase by 16%. This seems unlikely. In 2017 U.S. inflation was 2.1% Core inflation (cost inflation that excludes energy and food) was 1.8%. If we look at health care cost increases only 2016 they were about 4.3% and 2017 numbers are expected to be about the same. Wellmark has increased its premiums significantly more than national health expenses have increased for several years in a row now.

The Iowa Insurance Division should at a minimum ask Wellmark to indicate how much its health care expenditures have increased from 2016 to 2017 and so far in 2018 compared to 2017. And then to submit variable evidence to that effect.

Obviously, Iowans income is not increasing by double digit percentages every year.

If the Iowa Insurance Division cannot successfully control costs, how does it justify expending tax payer money year after year.

The Division should cap 2019 rate increases to 4.3%.

Ellen A. – Sioux City, IA – June 28, 2018

My rates have gone up continuously since I started approx 6 years ago. I think you should cut administrative rates. It is ridiculous what you pay them. I am sure you could get just as smart of people for less. The money should go to the people not the company. Without the people you have nothing. What is wrong with your business sense?

Jill M. – Monona, IA – June 28, 2018

I've never wrote in when we get this each year, but I've had enough. Every year this insurance has increased in past 4 years by over \$100 a year. Cost of inflation is 3% yet they want 11%. No family can continue to afford this, not with cost of steel, gas, electric, food, other insurance, interest rates, etc continue to go up. We are self employed, but I can't continue to do so if insurance continues to climb at this rate. I can't expect my customers rates to continue to go up because of us being gouged by other businesses. I understand a 3% increase, but I figured based on what my family insurance with a \$6500 deductible is will be up \$106.81 with the 11% they are requesting. My medical trend is not 16% as Wellmark said, so not sure why I continue to have to carry everyone else too. If they eliminate the girls who call to make sure your services are going well, the survey calls, etc, it would cut costs. I don't need them, if I need something I'll call their help line. Please do NOT let them continue to gouge us. Stand up for us please.

Carri D. – Estherville, IA – June 28, 2018

My husband and I have been Wellmark carriers for many years now. When we started with Wellmark our health insurance premiums were in the mid \$400 range. In the past 5 years our premiums have almost DOUBLED! It is now our second most expensive monthly payment. Unfortunately, our rate of pay hasn't increased nearly that much over the years and we now struggle to make the payments monthly on our high deductible plan. The struggle is real and by allowing this rate increase to happen you will be affecting people's daily lives for no better coverage or benefits. We have been paying these steep price increases for years because of limited options to switch and go elsewhere for a more competitive rate. Please consider the people that will be effected by this rate increase, we can't live like this anymore. Make healthcare affordable again!

Peace and love,

The Duitsman Family

L. E. – Gladbrook, IA – June 28, 2018

Our insurance is supposed to go up again. This is pathetic. Nothing else can be raised at this rate. Taxes aren't raised like this. Grocery prices, college tuition, etc. Cost of living doesn't go up this fast. I know that by me typing this up nothing will be done, this comment section is merely a legality to protect Wellmark from being sued. Our insurance after the 2019 hike will cost our family of 4 \$19,000 a year. It took me 20 years to pay off my education at the University of Iowa. Our insurance will now cost what two years of college education cost. People worry about paying for college, well we will have four years paid off in 2 years for what our health insurance coverage is. Our health insurance will cost double what our house payment costs per month. Our health insurance will be 40% of my income for the year. I work to pay taxes and health insurance. If I did not work we could qualify for gov benefits and not pay as much in taxes. So what is the incentive to work? We could get free school lunch, not pay for daycare, qualify for insurance subsidies, pay less in taxes. When i total this savings up, this is \$60k. So that's more than I make. So really i could sit around and do nothing all day and SAVE US MONEY. Insurance has gotten out of hand. So if we drop our insurance you go after our assets. We would be better off having nothing and just being sponges in the system. There is no win here. We are throwing money away for health insurance we do not use in case something happens so that we do not lose what we have been working to build for some many years. I guess when it comes down to it, everyone cannot have the same things. I do not feel that my rates should go up so that someone else can have the same thing as me and pay nothing. Someone is paying for it. So really you rob the middle class to cover up for the fact that now everyone has a right to insurance. I am expecting a class action lawsuit someday over all of this. It is robbery.

Becky T. – Curlew, IA – June 28, 2018

ENOUGH IS ENOUGH... MY BLUE CROSS GOES UP USUALLY AROUND \$100 PER MONTH SINCE I TURNED 60.... HARDLY EVER GO TO DR.???? MY PREMIUM IS REDICULOUS & STILL END UP PAYING THOUSANDS OUT OF POCKET AFTER MEETING THE 1,700 DEDUCTIBLE ????? VERY FRUSTRATED WITH HEALTH INSURANCE RATE PERIOD!!!!

Robert P. – Cedar Rapids, IA – June 28, 2018

lets be honest here. president obama started this insurance debacle. for mr. obama had to say all american's need heath insurance. after that the insurance company's said ok now is the time to cash in. you in state goverment need to make blue cross blue shield . wellmark to show you their spread sheets on why they need more money out of their customers . i think 11% is way to high. my cost is \$550.00 a month now. That's one weeks check out of my month. thats a house payment. i am a truck driver .making \$18.45 per hour. stop letting big companies lie to all of you about how they need a raise. i cant even afford to go on vacation when i have vacation days coming to me. so please tell this wellmark company no!!!!!!!!!!!!

Kristi K. – Alvord, IA – June 28, 2018

I'm responding to notice of proposed base premium rate: As a consumer who has bought my health insurance for my family from you for nearly 20 years, I ask what are you doing for me? With the increase in premiums, I receive less and less benefits. Periodically you send out letters stating more medical services you decline to cover. Why should I stay with your company?

So obviously I don't support a rate increase and believe that all the rate increase does is cushion the pockets of Wellmark Blue Cross Blue Shield Administration while sucking from the consumer, whom they try to convince otherwise!!

Why would I stay with Wellmark Blue Cross Blue Shield???

Sandra Dengel – Dysart, IA – June 28, 2017

I think your increase is absurd! My husband cannot think of anything that we purchase that has had the big of an increase. How do you expect us average Iowans to deal with these increases. Our price for crops sold or my hourly wage at the school does not ever increase by that much in a year. But I'm sure that this will get approved as usual and we will still keep plugging away paying our bills on time. I know that we are also paying for all the people that take advantage of the system. That is something that we have never done. If we couldn't pay for it, we didn't get it! Thank you for your time and I would hope you consider a lower increase this time.

Matt G. – Marshalltown, IA – June 27, 2018

These rate increases will affect my family/business/life in a very negative way. We have weathered several large increases in the last few years but to expect a double digit increase will greatly effect my business. I will voice my opinion as a NO to any rate increases for 2019.

Mark W. - Cedar Falls, IA - June 27, 2018

I too am against this rate increase. We've had rate increases almost every year for the last 5 years. I work multiple teaching jobs and pay for my own insurance out of pocket. The federal tax fee and administrative fees show reductions so what is the real justification for a rate increase? I rarely use my insurance, I go for a physical once a year and maybe 2-3 visits to urgent care or the Dr. a year. Health insurance should be affordable not crippling.

Bruce F. - Clarion, IA - June 27, 2018

11%? We all know that they will also add the 5.0% decrease in Government Fees and Admin Expense back in so we are really talking 16%. How did Medica come out with an 8% increase? Wellmark has been double digit plus for several years knowing that people like myself who are "grandfathered in" have no real option since the Affordable Care Act would be even more costly. I have reached my deductible only once in the 20 plus years that I have had Wellmark Blue Cross Blue Shield products. I will be paying approximately 10% of my gross income (before taxes) on health insurance and I'm supposed to be a good risk.

What is the Cost of Living increase in the United States? Certainly not 16%. I'm not sure that comments to your commission do any good because I can't remember the last time that Wellmark was denied their increase to any significant extent. Please take your title of Consumer Advocacy Office serious and deny the increase or cut it by at least 50% so that even more Iowans join the uninsured ranks while Wellmark's bottom line continues to improve.

Brenda W. - Montezuma, IA - June 27, 2018

I am opposed to the new increase for Wellmark Insurance. Our premiums are at the point we cannot afford now! We have an extremely high deductible at this point only to allow food on our tables. Someone, somewhere needs to get this under control!!! We rarely use our insurance and spend about the same amount monthly as it is for our rent. Each month is gets harder and harder to afford to even stay alive! One of my biggest complaints for your increase is the admin expenses.... the few times I have had to call the customer service, it seems they are already overpaid! Maybe your corporate officers don't need quite the check they are receiving as well... no one, and I mean no one is worth a six figure salary! So, without going on forever, my input is.... HELL NO!!!!

Carlton C. - Goldfield, IA - June 27, 2018

If this increase goes through, my premiums will have TRIPLED over a 9 year period. I am a non-smoker, non-drinker and healthy individual. I am 52 years old and have used very little of my insurance benefits apart from regular checkups. According to the notice I received, I am billed according to what people in my "rating class" are utilizing. I personally am not using their "technologies and drug therapies" at nearly the same rate. This "rating class" needs reviewed and these exorbitant increase in fees has to stop. These increases are a consistent form of robbery. I wish to understand why their requests are continually approved.

Kenny N. - Des Moines, IA - June 26, 2018

it seems to me that the rate increase has become pretty much automatic. I work in the insurance industry and my rate of what I can charge has been fixed for 30 years. I don't see why my children have to get a 2nd job just to pay for healthcare. seems like you promote people to quit work get welfare and let the taxpayers pay for it. seems to be a better health plan too.

Dean L. - Sergeant Bluff, IA - June 26, 2018

I am strongly opposed to any increase for Wellmark for 2019. We have been Wellmark customers for several years and have seen double digit increases year over year over year, with the most recent being 23% for 2018. Along with increases, we have seen significant increases in our deductible amount and reductions in services covered. Effectively, we are paying much more for much less.

Wellmark may argue that they are paying providers more to justify price increases, but I know that is not true. I own Sergeant Bluff Pharmacy, and for 2018 have seen huge reductions in the amount paid to my pharmacy by Wellmark. We are experiencing payment reductions around 20%, when we should be seeing increases to cover the increased cost of medications.

Please do your homework, check with providers, and verify any "reasons" Wellmark may be claiming as justification for the proposed rate increases. I have to pay 23% more in my premium for 2018 as an insured and am getting paid 20% less by Wellmark as a provider. If anything, Wellmark should be required to reduce rates instead of being allowed to benefit from both premium increases and provider payment reductions.

Judy J. - Sioux City, IA - June 25, 2018

I read in the paper that Wellmark has requested a 5.3 percent to 11 percent increase in premiums for grandfathered health insurance plans. I now pay \$690.95 per month for my plan. I like my plan, but am anxious about how I will continue to pay for my plan. I am personally requesting an increase not be granted. We need a kinder, gentler health insurance/health care industry. Thank you.

Judy J. – Sioux City, IA – June 25, 2018

Greetings,

When reading my Sunday paper. I read an article concerning my health insurance plan with Wellmark.

Wellmark has requested a 5.3 percent to 11 percent increase depending on the plan. I now pay \$690.95 per month for the plan I have. That is one-fourth of our income!! (Monthly) I like my plan – however I am constantly anxious about how I will be able to pay for my plan until I can go on Medicare. I am 61 years old.

The article stated as of April of this year Wellmark has about 63,500 members in pre-ACA plans – some of them are probably anxious, too.

I am personally requesting an increase not be granted.

We need a kinder, gentler health insurance/health care industry. One that helps people pay their medical bills. Not plans that may have lower premiums, but pay for little medical expenses or plans with such high premiums people have to decide between health insurance or food or housing.

Thanks you.

Judy J.